Apomorphine (Apokyn®)	Place of Service Office Administration Home Infusion Administration Outpatient Facility Administration Infusion Center Administration Self-Administration HCPCS: J0364 per 1 mg

Conditions listed in policy (*see criteria for details*)

- Parkinson's disease

AHFS therapeutic class: Dopamine agonist; anti-parkinson agent

Mechanism of action: Apomorphine hydrochloride is a nonergot-derivative dopamine receptor agonist.

(1) Special Instructions and Pertinent Information

If member has a Prescription Benefit, please refer cases to Pharmacy Services for prior authorization.

If covered under the Medical Benefit, please submit clinical information for prior authorization review. **Please provide medical rationale why medication cannot be home self-administered.**

(2) Prior Authorization/Medical Review is required for the following condition(s)

All requests for Apokyn® (apomorphine) must be sent for clinical review and receive authorization prior to drug administration or claim payment.

Parkinson's disease

1. Recommended by a neurologist, **AND**
2. Being used to treat PD "off" episodes, **AND**
3. Inadequate response or intolerance to at least one adjunctive therapy (e.g., COMT inhibitor, MAO-B inhibitor, dopamine agonist), or contraindication to all

Covered Doses
Up to 0.6 mL (6 mg) per SC injection (not to exceed 20 mg/day)

Coverage Period
Cover indefinitely

ICD-10:
G20

(3) The following condition(s) DO NOT require Prior Authorization/Preservice

All requests for Apokyn® (apomorphine) must be sent for clinical review and receive authorization prior to drug administration or claim payment.

(4) This Medication is NOT medically necessary for the following condition(s)

Coverage for a Non-FDA approved indication, requires that criteria outlined in Health and Safety Code § 1367.21, including objective evidence of efficacy and safety are met for the proposed indication.

Please refer to the Provider Manual and User Guide for more information.

(5) Additional Information

How supplied:

30 mg/3ml (single use cartridge to be used with a pen injector)

(6) References

- Apokyn® (apomorphine hydrochloride injection) [Prescribing information]. Rockville, MD: MDD US Operations, LLC; 6/2022.
- AHFS DI. http://www.lexi.com
- DrugDex®. Available by subscription at http://www.micromedexsolutions.com/home/dispatch
- Fox SH, Katzenschlager R, Lim SY, et al. International Parkinson and Movement Disorder Society Evidence-Based Medicine Review: Update on Treatments for the Motor Symptoms of Parkinson's Disease. Movement Disorders 2018.

(7) Policy Update

Date of last review: 4Q2022
Date of next review: 4Q2023
Changes from previous policy version:

- No clinical change to policy following routine annual review.

BSC Drug Coverage Criteria to Determine Medical Necessity
Reviewed by P&T Committee